

# APPLICATION FORM

## Dr. Arnold By Travel Fellowship

*Section A: To be completed by the student*

NAME: \_\_\_\_\_ STUDENT NUMBER: \_\_\_\_\_  
EMPLOYEE ID NUMBER (see recent pay advice): \_\_\_\_\_  
RESEARCH SUPERVISOR: \_\_\_\_\_  
PAYMENT:  Directly to the student  Deposit to supervisor's speedchart: \_\_\_\_\_  
CONFERENCE: \_\_\_\_\_  
LOCATION: \_\_\_\_\_  
DATES: \_\_\_\_\_  
TITLE OF PAPER TO BE  
PRESENTED†: \_\_\_\_\_

(†A one-page abstract of the submission must be attached to this application.)

Degree programme:	M.Sc.			Ph.D.		
Year of programme	1	2	3	4	5	>5
Confirmation that my submission has been accepted is	attached			forthcoming		
I have previously presented work at a conference or symposium	yes			no		
I am applying for support from other University-administered funds	yes			no		
I have previously applied for support from this fund	yes			no		

I understand that the available support is limited, and that not all applicants may be funded.

STUDENT'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

*Section B: To be completed by the student's supervisor*

I support this application for conference assistance. The student named above will be making the conference presentation.

SUPERVISOR'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

*Section C: Approval*

Graduate Advisor/Head's Signature \_\_\_\_\_ Date: \_\_\_\_\_

*Please return completed application forms to Graduate Program Assistant (Sheri Harbour)*